

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial)

**A.** Tonio Burgos & Associates Of New Jersey LLCMailing Address 115 Broadway  
Rm 1504City  
New YorkState  
NYZip Code  
10006-1619FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2020			

Transaction ID : VTR35TZ7RP2

Amount of Each Receipt this Period

2800.00

☐ Memo Item

LLC - Members below if itemized. Permissible funds.

Full Name (Last, First, Middle Initial)

**B.** Burgos, Tonio, , ,Mailing Address 115 Broadway  
Rm 1504City  
New YorkState  
NYZip Code  
10006-1619FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2020			

Transaction ID : VTR35TZ7RT3

Amount of Each Receipt this Period

2800.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Towbin, Linda, , ,

Mailing Address 77 Oak Ridge Dr

City  
BethanyState  
CTZip Code  
06524-3117FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

920.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2020			

Transaction ID : VTR35TY60V0

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3050.00

**TOTAL** This Period (last page this line number only)..... ▶